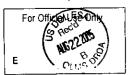
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257 as amended. Fail are to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

12340	<u> </u>	1/1/:	2004 Through:	12 / 31	2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.				
Name Christopher J Romero	Name	TUPAT Local	Union 323	-	
	Labor	Organization File Nu	rnber 326-029		
P.O. Box, Bldg., Room No., if any	P.O. I	Box, Building and Ro	om Number, if any		
Street 108 General Arnold NE	Stree	205-C Welles	ley Dr., SE		
City Albuquerque	City	Albuquerque		•	-
State New Mexico ZIP Code + 4 87123	State	New Mexico		ZIP Code + 4	87106
5. Position in labor organization. President/ JATC Coordinator					
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.					
Name and address of Employer (including trade name, if any).	7.a. Na	ture of Interest, Trans	action, or Income.		
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any	7.b. Ar	nount.		-	· · ·
Street					
City					
State ZIP Code + 4					
Signature					
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties cf the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)					
Signed	On	8/15/2005	505-293-24		
		Date		elephone Numb	per .

Name of Person Filing Christopher Romero	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8, Name and address of Business (including trade name, if any).	9. Business deals with:			
Name	a. Labor Organization b. Trust c. Employer			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City State ZIP Code + 4				
10. If 9.b. or 9.c. is checked give trust or employer's name	11.a. Nature of such dealing.			
Name IUPAT JATF	Travel Expenses and Graduation Banquet for instructor seminar.			
Trade Name, if any: Joint Apprenticeship Training Fund				
P.O. Box, Bldg., Room No., if any				
Street 1750 New York Ave., NW	11.b. Approximate dollar value of such dealing. \$1,451			
City Washington	12.a. Nature of interest held or income received.			
State District of Columbia ZIP Code + 4 20006				
	12,b, Amount.			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				

14.b. Amount of payment.

13.b. Is the Business an Employer

State

ZIP Code + 4

or Consultant

?

DISCLAIMER

The transactions dealings and interests that are detailed in the attached Form LM-30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing, or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will file an amended Form LM-30.